

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			5. LEASE DESIGNATION AND SERIAL NO. U-4481	
b. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>			6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
2. NAME OF OPERATOR Wexpro Company			7. UNIT AGREEMENT NAME Island	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902			8. FARM OR LEASE NAME Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface NW NE 610' FNL, 2099' FEL At proposed prod. zone			9. WELL NO. 25	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* Approximately 15 miles south and west of Ouray, Utah			10. FIELD AND POOL, OR WILDCAT Island NAT. BUTTES	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any) 610'		16. NO. OF ACRES IN LEASE 600	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 1655'		19. PROPOSED DEPTH 6,925'	12. COUNTY OR PARISH Uintah	
21. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062'		17. NO. OF ACRES ASSIGNED TO THIS WELL NA		
		20. ROTARY OR CABLE TOOLS Rotary		
		22. APPROX. DATE WORK WILL START* March 1, 1986		

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	9-5/8	36	300'	165 Sacks Regular Type G with additives
7-7/8	5-1/2	17	6925'	50-50 Pozmix with additives

See attached drilling plan.

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 3-18-86
BY: John R. Bays
WELL SPACING: 213

RECEIVED
FEB 10 1986

DIVISION OF
OIL, GAS & MINING

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED A. J. Mauer TITLE Drilling Superintendent DATE 2-6-86
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

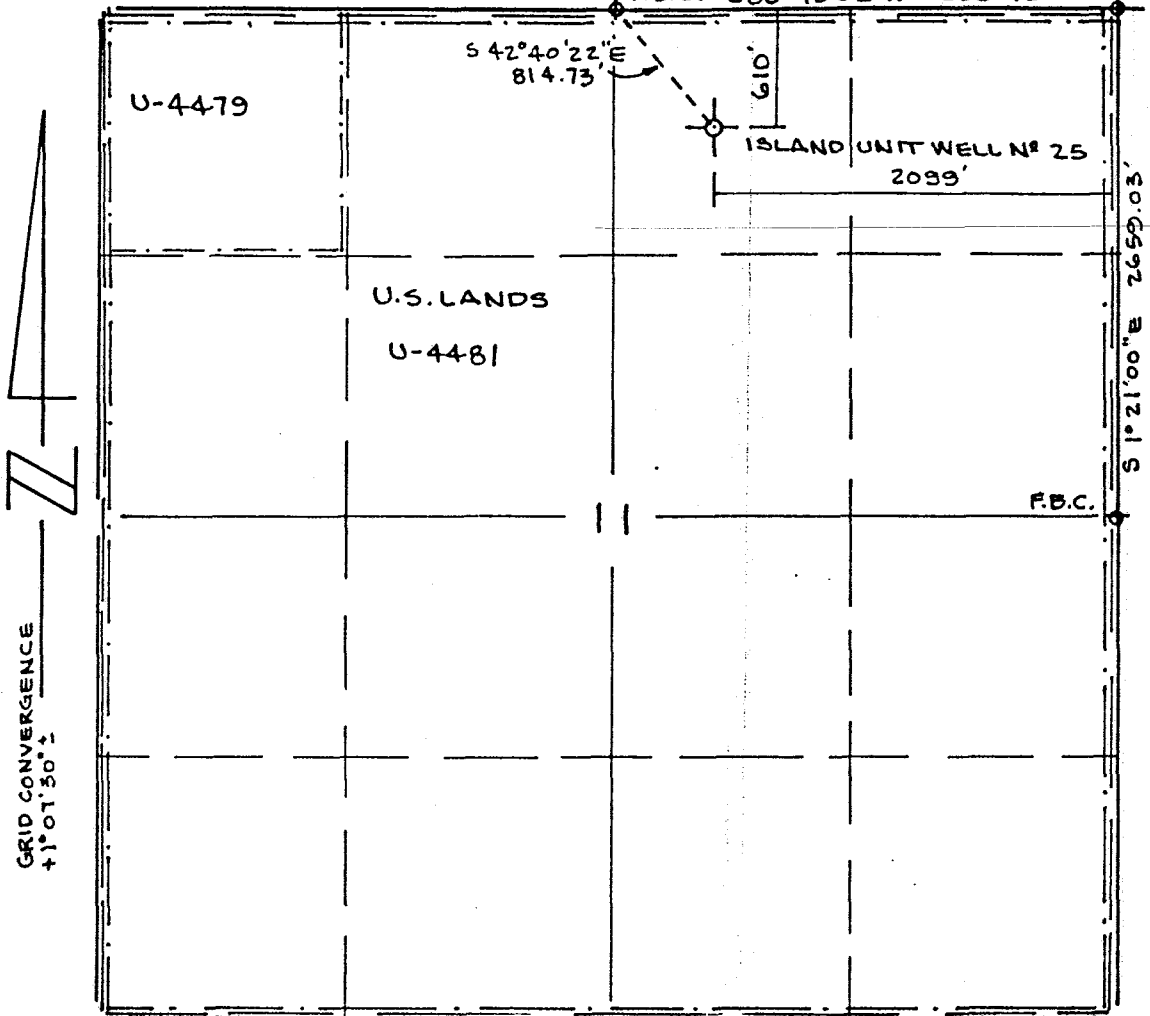
*See Instructions On Reverse Side

T.10S.,R.19E.,S.L.B.4M.

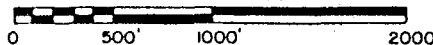
UINTAH CO., UTAH

F.B.C. S88°49'02"W 2636.75'

F.B.C.



LOCATION PLAN
SCALE 1"=1000'



LEGEND

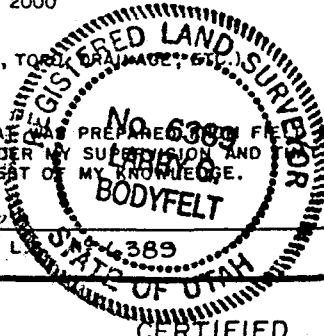
- SURFACE OWNER BOUNDARY
- MINERAL LEASE BOUNDARY

- ⊕ WELL LOCATION
- ⊕ FD. BRASS CAP
- ⊕ FD. STONE

NOTE: FOR SURFACE INFORMATION (ROADS, TOP OF GRADE, ETC.) SEE AREA MAP.

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM NOTES OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

LARRY G. BODYFELT, UTAH REG.



NOTE: All bearings reported herein are referred to the Utah Coordinate System, Central Zone, 1927 NAD, as determined by solar observation and convergence adjustment. GLO & BLM record bearings used for calculated intersections, if any, are rotated to grid north reference. All distances reported hereon are surface distances.

ENGINEERING RECORD

SURVEYED: M.K.K.	FIELD: ISLAND
BASIS OF BEARING: SOLAR OBSERVATION	
SURFACE OWNER: U.S. GOVERNMENT LANDS	
MINERAL LEASE: U-4481	
LOCATION: NW 1/4, NE 1/4, SEC. 11, T10S, R19E S.L.B.4M.	
610' FNL, 2099' FEL	
COUNTY: UTAH	STATE: UTAH
ELEVATION AS GRADED: 5062 FROM MAP SPOT	
ELEV. AT NE SEC. CORNER	

WELL LOCATION PLAT

ISLAND UNIT WELL No 25

DRAWN: 1-31-86 CRW	SCALE: 1"=1000'
CHECKED: [Signature]	DRWG. NO. M-25072
APPROVED: [Signature]	

DRILLING PLAN
Wexpro Company
Island Unit Well No. 25
Uintah County, Utah

1 & 2. SURFACE FORMATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

Uintah	-	Surface
Green River	-	1,825'
Birds Nest Aquifer	-	2,300'
Wasatch Tongue	-	4,445', gas or oil
Green River Tongue	-	4,790', gas or oil
Wasatch	-	4,950', gas
Chapita Wells Zone	-	5,725', objective, gas
Total Depth	-	6,925'

All fresh water and prospectively valuable minerals (as described by BLM at onsite) encountered during drilling, will be recorded by depth and adequately protected. All oil and gas shows will be tested to determined commercial potential.

3. PRESSURE CONTROL EQUIPMENT: (See attached diagram)
Operator's minimum specifications for pressure control equipment requires an 11-inch 3000 psi double gate hydraulically operated blowout preventer and an 11-inch 3000 psi annular preventer. Ram-type preventers will be tested to 2000 psi and annular preventers will be tested to 1500 psi for 15 minutes using professional testing company. NOTE: The surface casing will be pressure tested to a minimum of 1000 psi; or one psi per foot; or 70 percent of the internal yield of the casing, whichever is applicable. BOP's will be checked daily as to mechanical operating condition and will be tested after each string of casing is run. All ram type preventers will have hand wheels which will be operative at the time the preventers are installed.

BOP systems will be consistent with API RP53. Pressure tests will be conducted before drilling out from under casing strings which have been set and cemented in place. Blowout preventer controls will be installed prior to drilling the surface casing plug and will remain in use until the well is completed or abandoned. Preventers will be inspected and operated at least daily to ensure good mechanical working order, and this inspection will be recorded on the daily drilling report. Preventers will be pressure tested before drilling casing cement plugs.

The District Office will be notified, with sufficient lead time, in order to have a BLM representative on location during pressure testing.

4. CASING PROGRAM:

Footage	Size	Grade	Wt.	Condition	Thread	Cement
300	9-5/8	K-55	36	New	8 rd ST&C	165 sacks Regular Type G with 3% calcium chloride and 1/4-pound flocele/sack; cement will be brought to surface.
6925	5-1/2	K-55	17	New	8 rd LT&C	Cement top will be brought 1000 feet from surface with 50-50 Pozmix with 8% gel, 0.2% Halad-24, 10% salt, 5 pounds gilsonite/sack and 1/4-pound flocele/sack, plus 1000 feet 50-50 Pozmix with 2% gel, 0.6% Halad-24, 10% salt and 1/4-pound flocele/sack.

AUXILIARY EQUIPMENT:

- a) Manually operated kelly cock
- b) No floats at bit
- c) Monitoring of mud system will be visual
- d) Full opening floor valve manually operated

The District Office will be notified, with sufficient lead time, in order to have a BLM representative on location while running all casing strings and cementing.

5. MUD PROGRAM: A gel chemical water base mud will be used from surface casing to total depth.

Sufficient mud materials to maintain mud properties, control lost circulation and to contain blowout will be available at the wellsite.

No chromate additives will be used in the mud system on Federal and Indian lands without prior BLM approval to ensure adequate protection of fresh water aquifers.

6. LOGGING: DLL-SFL-GR from surface casing to total depth
BHC-Sonic with Caliper from surface casing to total depth
CNL-FDC-GR over zones of interest

TESTING: None.

CORING: None. .

Daily drilling and completion reports shall be submitted to the Bureau of Land Management, Vernal, Utah on a weekly basis.

Whether the well is completed as a dry hole or as a producer, "Well Completion and Recompletion Report and Log" (Form 3160-4) will be submitted not later than 30 days after

completion of the well or after completion of operations being performed, in accordance with 43 CFR 3164. Two copies of all logs, core descriptions, core analyses, well-test data, geologic summaries, sample description, and all other surveys or data obtained and compiled during the drilling, workover, and/or completion operations, will be filed with Form 3160-4. Samples (cuttings, fluids, and/or gases) will be submitted when requested by the authorized officer (AO).

7. ABNORMAL PRESSURE AND TEMPERATURE: No abnormal pressures are expected; a BHT of 150°F. and a BHP of 3540 psi are anticipated.
8. ANTICIPATED STARTING DATE: March 1, 1986

DURATION OF OPERATION: 12 days drilling

No location will be constructed or moved, no well will be plugged, and no drilling or workover equipment will be removed from a well to be placed in a suspended status without prior approval of the AO. If operations are to be suspended, prior approval of the AO will be obtained and notification given before resumption of operations.

The spud date will be reported orally to the AO within 48 hours after spudding. If the spudding occurs on a weekend or holiday, the report will be submitted on the following regular work day. The oral report will be followed up with a Sundry Notice.

In accordance with Onshore Oil and Gas Order No. 1, this well will be reported on Form 3160-6 "Monthly Report of Operations", starting with the month in which operations commence and continue each month until the well is physically plugged and abandoned. This report will be filed with the Vernal BLM District Office, 170 South 500 East, Vernal, Utah 84078.

Immediate Report: Spills, blowouts, fires, leaks, accidents, or any other unusual occurrences shall be promptly reported in accordance with the requirements of NTL-3A or its revision.

If a replacement rig is contemplated for completion operations, a "Sundry Notice" (Form 3160-5) to that effect will be filed, for prior approval of the AO, and all conditions of this approval plan are applicable during all operations conducted with the replacement rig.

Should the well be successfully completed for production, the AO will be notified when the well is placed in a producing status. Such notification will be sent by telegram or other written communication, not later than five days following the date on which the well is placed on production.

Pursuant to NTL-2B, with the approval of the District Engineer, produced water may be temporarily disposed of into unlined pits for a period of up to 90 days. During the period so authorized, an application for approval of the permanent disposal method, along with the required water analysis and other information, will be submitted to the District Engineer.

Pursuant to NTL-4A, lessees or operators are authorized to vent/flare gas during initial well evaluation tests, not exceeding a period of 30 days or the production of 50 MMCF of gas, whichever occurs first. An application will be filed with the District Engineer and approval received, for any venting/flaring of gas beyond the initial 30 day or authorized test period.

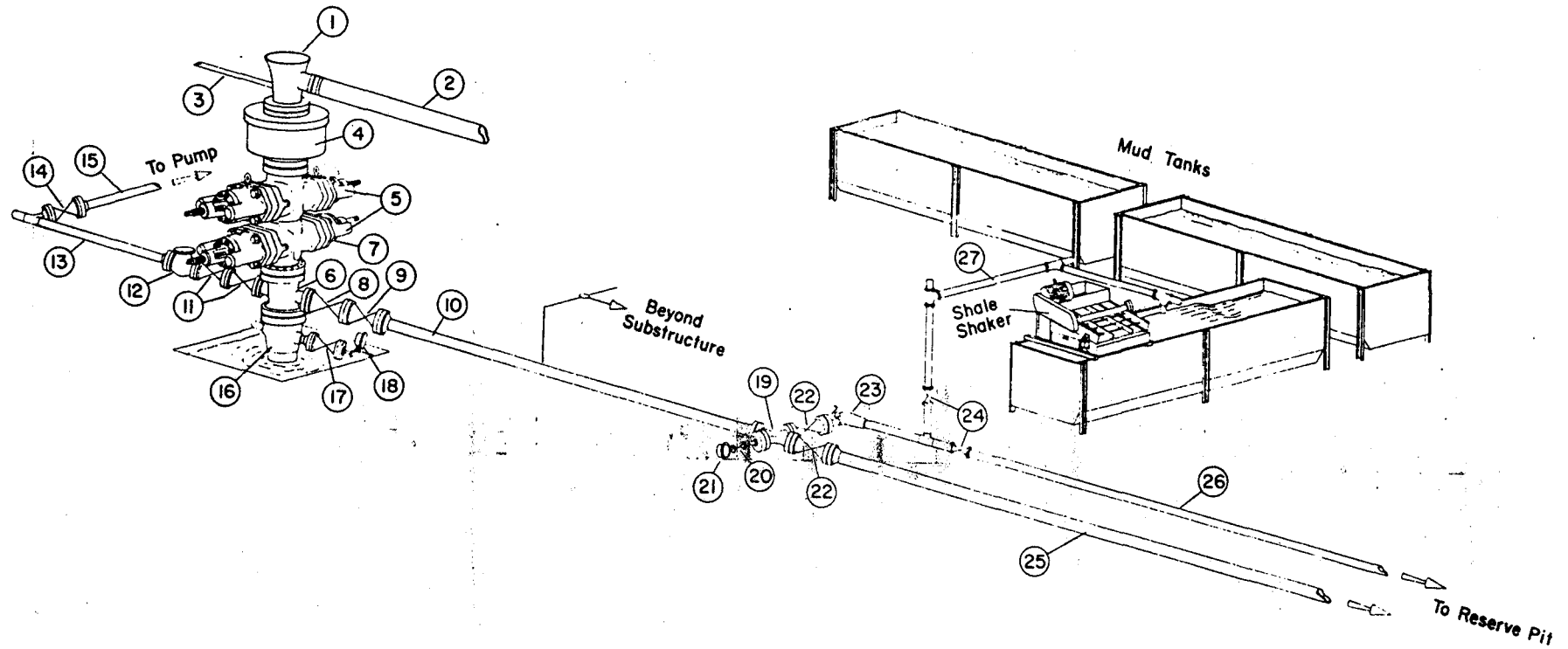
A schematic facilities diagram as required by 43 CFR 3162.7-2, 3162.7-3, and 3162.7-4 shall be submitted to the appropriate District Office within 30 days of installation or first production, whichever occurs first. All site security regulations as specified in 43 CFR 3162.7 shall be adhered to. All product lines entering and leaving hydrocarbon storage tanks will be effectively sealed in accordance with 43 CFR 3162.7-4.

A first production conference will be scheduled within 15 days after receipt of the first production notice.

No well abandonment operations will be commenced without the prior approval of the AO. In the case of newly drilled dry holes or failures, and in emergency situations, oral approval will be obtained from the SO. A "Subsequent Report of Abandonment" Form 3160-5, will be filed with the AO within 30 days following completion of the well for abandonment. This report will indicate where plugs were placed and the current status of surface restoration. Final abandonment will not be approved until the surface reclamation work required by the approved APD or approved abandonment notice has been completed to the satisfaction of the AO or his representative, or the appropriate Surface Managing Agency.

Pursuant to Onshore Oil and Gas Order No. 1, lessees and operators have the responsibility to see that their exploration, development, production, and construction operations are conducted in a manner which conforms with applicable Federal laws and regulations and with State and local laws and regulations to the extent that such State and local laws are applicable to operations on Federal or Indian lands.

CELSIUS/WEXPRO 3000 psi BLOWOUT PREVENTION EQUIPMENT



STANDARD STACK REQUIREMENTS

Nº	ITEM	NOMINAL	ID	TYPE	FURNISHED BY	
					OPER.	CONTR.
1	Drilling Nipple (Rotating Head when air drilling)					
2	Flowline					
3	Fill up Line (eliminated for air drilling)	2"				
4	Annular Preventer			Hydril Cameron Shaffer		
5	Two Single or One dual Hydril oper rams.			U.ORG; F.EWS; B.F		
6	Drilling spool with 3" and 2" outlets			Forged		
7	As Alternate to (6) Run & Kill and Choke lines from outlets in this ram					
8	Gate Valve		3-1/8			
9	Valve-hydraulically operated (Gate)		3-1/8			
10	Choke Line	3"				
11	Gate Valves		2-1/16			
12	Check Valve		2-1/16			
13	Kill Line	2"				
14	Gate Valve		2-1/16			
15	Kill Line to Pumps	2"				
16	Casing Head					
17	Valve Gate _____ Plug _____		1-13/16			
18	Compound Pressure Cage					
	Wear Bushing					

[illegible][illegible]

OPERATOR Weypro Co DATE 2-14-86

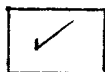
WELL NAME Island Unit 25

SEC NW NE 11 T 10S R 19E COUNTY Winted

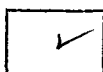
43-047-31702
API NUMBER

Feb.
TYPE OF LEASE

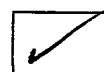
CHECK OFF:



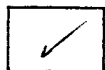
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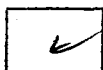
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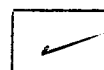
NEAREST
WELL



LEASE



FIELD



POTASH OR
OIL SHALE

PROCESSING COMMENTS:

Unit Well - & on P.O.D. 3/14/86

Need water permit

APPROVAL LETTER:

SPACING: ☒ 203 Island
UNIT

☐ 302

☐ CAUSE NO. & DATE

☐ 302.1

STIPULATIONS:

1- Water



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Norman H. Bangerter, Governor
Dee C. Hansen, Executive Director
Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

March 18, 1986

Wexpro Company
P. O. Box 458
Rock Springs, Wyoming 82902

Gentlemen:

Re: Well No. Island Unit 25 - NW NE Sec. 11, T. 10S, R. 19E
610' FNL, 2099' FEL - Uintah County, Utah

Approval to drill the referenced well is hereby granted in accordance with Section 40-6-18, Utah Code Annotated, as amended 1983; and predicated on Rule 203, Oil and Gas Conservation General Rules, subject to the following stipulations:

1. Prior to commencement of drilling, receipt by the Division of evidence providing assurance of an adequate and approved supply of water as required by Chapter 3, Title 73, Utah Code Annotated.

In addition, the following actions are necessary to fully comply with this approval:

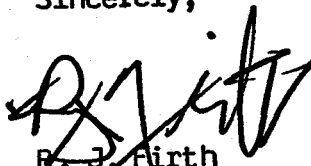
1. Spudding notification to the Division within 24 hours after drilling operations commence.
2. Submittal to the Division of completed Form OGC-8-X, Report of Water Encountered During Drilling.
3. Prompt notification to the Division should you determine that it is necessary to plug and abandon this well. Notify John R. Baza, Petroleum Engineer, (Office) (801) 538-5340, (Home) 298-7695, or R. J. Firth, Associate Director, (Home) 571-6068.
4. Compliance with the requirements and regulations of Rule 311.3, Associated Gas Flaring, Oil and Gas Conservation General Rules.

Page 2
Wexpro Company
Well No. Island Unit 25
March 18, 1986

5. Prior to commencement of the proposed drilling operations, plans for toilet facilities and the disposal of sanitary waste at each drill site shall be submitted to the local health department having jurisdiction. Any such drilling operations and any subsequent well operations must be conducted in accordance with applicable State and local health department regulations. A list of all local health departments and copies of applicable regulations are available from the Division of Environmental Health, Bureau of General Sanitation, telephone (801) 533-6163.
6. This approval shall expire one (1) year after date of issuance unless substantial and continuous operation is underway or an application for an extension is made prior to the approval expiration date.

The API number assigned to this well is 43-047-31702.

Sincerely,



R. J. Firth
Associate Director, Oil & Gas

as
Enclosures
cc: Branch of Fluid Minerals
D. R. Nielson

8159T

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐

GAS
WELL ☒

OTHER

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, WY 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

NW NE 610' FNL, 2099' FEL

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

Approximately 15 miles south and west of Ouray, Utah

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drig. unit line, if any)

610'

16. NO. OF ACRES IN LEASE

600

17. NO. OF ACRES ASSIGNED

TO THIS WELL

NA

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1655'

19. PROPOSED DEPTH

6,925'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 5062'

22. APPROX. DATE WORK WILL START*

March 1, 1986

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	9-5/8	36	300'	165 Sacks Regular Type G with additives
7-7/8	5-1/2	17	6925'	50-50 Pozmix with additives

See attached drilling plan.

RECEIVED
MAR 26 1986

DIVISION OF
OIL, GAS & MINING

FEB 1986

FEB 10 1986

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

A. J. Maurer

TITLE

Drilling Superintendent

DATE

2-6-86

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

L. H. Ferguson

TITLE

DISTRICT MANAGER

DATE

3/19/86

CONDITIONS OF APPROVAL, IF ANY:

NOTICE OF APPROVAL

CONDITIONS OF APPROVAL ATTACHED
TO OPERATOR'S COPY

*See Instructions On Reverse Side

CONDITIONS OF APPROVAL FOR NOTICE TO DRILL

Company Wexpro Company Well No. 25
Location Sec. 11 T10S R19E Lease No. U-4481
Onsite Inspection Date 02-19-86

All lease and/or unit operations will be conducted in such a manner that full compliance is made with applicable laws, regulations (43 CFR 3100), Onshore Oil and Gas Order No. 1, and the approved plan of operations. The operator is fully responsible for the actions of his subcontractors. A copy of these conditions will be furnished the field representative to insure compliance.

A. DRILLING PROGRAM

1. Water Encountered

All water shows and water sands will be orally reported to Wayne Svejnoha of this office.

2. Pressure Control Equipment

Choke manifold systems will be consistent with API RP 53.

3. Other Information

All loading lines will be placed inside the berm surrounding the tank battery.

All site security guidelines identified in 43 CFR 3162.7 regulations will be adhered to.

All off-lease storage, off-lease measurement, or commingling on-lease or off-lease will have prior written approval from the AO.

Gas meter runs for each well will be located within 500 feet of the wellhead. The gas flowline will be buried or anchored down from the wellhead to the meter and 500 feet downstream of the meter run or any production facilities. Meter runs will be housed and/or fenced.

The oil and gas measurement facilities will be installed on the well location. The oil and gas meters will be calibrated in place prior to any deliveries. Tests for meter accuracy will be conducted monthly for the first three months on new meter installations and at least quarterly thereafter. The AO will be provided with a date and time for the initial meter calibration and all future meter proving schedules. A copy of the meter calibration reports will be submitted to the Vernal District Office. All meter measurement facilities will conform with the API standards for liquid hydrocarbons and the AGA standard for natural gas measurement.

The use materials under BLM jurisdiction will conform to 43 CFR 3610.2-3.

There will be no deviation from the proposed drilling and/or work-over program without prior approval from the AO. Safe drilling and operating practices must be observed. All wells, whether drilling, producing, suspended, or abandoned will be identified in accordance with 43 CFR 3162.

"Sundry Notice and Report on Wells" (Form 3160-5) will be filed for approval for all changes of plans and other operations in accordance with 43 CFR 3162.3-2.

CONDITIONS OF APPROVAL FOR THE
SURFACE USE PROGRAM OF THE
APPLICATION FOR PERMIT TO DRILL

1. Access Roads to be Constructed or Reconstructed:

Access road surface ownership: BLM-Administered Lands

Access roads and surface disturbing activities will conform to standards outlined in the USGS publication (1978) Surface Operating Standards for Oil and Gas Development.

All travel will be confined to existing access road right-of-ways. The road shall be upgraded to meet the standards of the anticipated traffic flow and all-weather road requirements. Upgrading shall include ditching, draining, graveling, crowning, and capping the roadbed as necessary to provide a well constructed safe road. Prior to upgrading, the road shall be cleared of any snow cover and allowed to dry completely. Travelling off the 30 foot right-of-way will not be allowed. Road drainage crossings shall be of the typical dry creek drainage crossing type. Crossings shall be designed so they will not cause siltation or accumulation of debris in the drainage crossing, nor shall the drainages be blocked by the roadbed. Erosion of drainage ditches by runoff water shall be prevented by diverting water off at frequent intervals by means of cutouts. Upgrading shall not be allowed during muddy conditions. Should mud holes develop, they shall be filled in and detours around them avoided.

The proposed access road shall involve upgrading $\frac{1}{2}$ mile of present two-track trail and flagged access indicated on area map (ft. or mile) as agreed upon during the onsite inspection. Remainder of planned access road involves use of presently adequate existing roads.

2. Methods for Handling Waste Disposal:

On BLM administered lands:

The reserve pit shall not be lined.

Produced waste water will be confined to an unlined pit or, if deemed necessary, a storage tank for a period not to exceed 90 days after first production. During the 90-day period an application for approval of a permanent disposal method and location, along with required water analysis, will be submitted for the AO's approval. Failure to file an application within the time allowed will be considered an incident of noncompliance.

3. Plans for Reclamation of the Surface:

An appropriate seed mixture will be determined by the BLM, either as part of the conditions of approval of the APD or at the time restoration activities are scheduled to begin.

All seeding will be done from September 1 until the ground freezes.

At such time as the well is plugged and abandoned, the operator will submit a surface reclamation plan to the Surface Management Agency for prescribed seed mixtures and reseeding requirements.

If the seeding is unsuccessful, the lessee/operator may be required to make subsequent seedings.

The BLM recommends the following procedure for reclamation:

Compacted areas of the well pad should be plowed or ripped to a depth of 12" before reseeding. Seeding should be done with a disc-type drill to ten inches apart. The seed should be planted between one-half inch deep and three-quarter inch deep. A drag, packer or roller may be used to insure uniform coverage of the seed, and adequate compaction. Drilling of the seed should be done on the contour where possible. Where slopes are too steep for contour drilling, a "cyclone" hand-seeder or similar broadcast seeder should be used, using twice the recommended seed per acre. Seed should then be covered to a depth described above by whatever means is practical.

4. Other Information:

Additional Surface Stipulations for BLM, BIA, FS, DWR or Private Surface Lands:

The operator or his contractor shall contact the BLM Office at (801) 789-1362 between 24 and 48 hours prior to construction activities. Contact the Book Cliffs Resource Area.

In the event after-hour approvals are necessary, please contact one of the following individuals:

Craig M. Hansen	(801) 247-2318
Assistant District Manager	
for Minerals	

Gerald E. Kenczka	(801) 781-1190
Petroleum Engineer	

R. Allen McKee	(801) 781-1368
Petroleum Engineer	

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

25

10. FIELD AND POOL OR WILDCAT

Island

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, WY 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

NW NE, 610' FNL, 2099' FEL

DIVISION OF
OIL, GAS & MINING

14. PERMIT NO.

43-047-31702

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 5062'

16

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

XX

(Other)

(Other)

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATION (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wexpro Company requests permission to change the Casing Program of the above captioned well APD as follows:

Footage	Size	Grade	Wt.	Condition	Thread	Cementing Program
300'	9-5/8	K-55	36	New	8 rd ST&C	165 sacks Regular Type G with 3% CaCl and 1/4-pound flocele/sack; cement will be brought to surface.
3375'	5-1/2	N-80	17	Used	8 rd LT&C	Cement top will be brought 1000
1700'	5-1/2	L-80	20	Used	8 rd LT&C	feet from surface with 50-50 Pozmix
1300'	5-1/2	L-80	20	New	8 rd LT&C	with 8% gel, 0.2% Halad-24, 10% salt
550'	5-1/2	AR-95	20	Used	8 rd LT&C	5 pounds gilsonte/sack and 1/4-pound flocele/sack, plus 1000 feet 50-50 Pozmix with 2% gel, 0.6% Halad-24, 10% salt and 1/4-pound flocele/sack.

Change in casing program is due to availability of casing in stock.

Water for drilling will be obtained from the Green River under Application No. T-61634, permit number 49-1390.

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. Mauer

TITLE Drilling Superintendent

DATE March 31, 1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

Federal approval of this action
is required before commencing
operations.

*See Instructions on Reverse Side

ACCEPTED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 4-4-86

BY: *John R. Bays*

DIVISION OF OIL, GAS AND MINING

SPODDING INFORMATION

API #43-047-31702

NAME OF COMPANY: WEXPRO

WELL NAME: ISLAND UNIT 25

SECTION NW NE 11 TOWNSHIP 10S RANGE 19E COUNTY Uintah

DRILLING CONTRACTOR _____

RIG # _____

SPODDED: DATE 4-14-86

TIME 11:00 AM

HOW Air

DRILLING WILL COMMENCE 4-14-86 - Brinkerhoff #85

REPORTED BY Shirley

TELEPHONE # 307-382-9791

DATE 4-15-86 SIGNED JRB

FILING FOR WATER IN THE STATE OF UTAH

APPLICATION TO APPROPRIATE WATER

Rec. by _____
Fee Paid \$ _____
Platted _____
Microfilmed _____
Roll # _____

For the purpose of acquiring the right to use a portion of the unappropriated water of the State of Utah, application is hereby made to the State Engineer, based upon the following showing of facts, submitted in accordance with the requirements of the Laws of Utah.

WATER USER CLAIM NO. 49 - 1390

APPLICATION NO. T61634

PRIORITY OF RIGHT: March 31, 1986

FILING DATE: March 31, 1986

OWNER INFORMATION

Name: D.E.Casada Construction

Address: 221 South 1000 East, Vernal, UT 84078

The land is not owned by the applicant(s), see explanatory.

RECEIVED
APR 17 1986

QUANTITY OF WATER: 12.0 acre feet (Ac. Ft.)

SOURCE: Green River DRAINAGE: SE Uinta Basin

POINT(S) OF DIVERSION:

COUNTY: Uintah

(1) N. 4224 feet, W. 1056 feet, from the SW Corner of Section 5,

Township 10 S, Range 19 E, SLB&M

Description of Diverting Works: Pumped Into tank Trucks

COMMON DESCRIPTION: 14 MI.SW of Ouray

DIVISION OF
OIL, GAS & MINING

NATURE AND PERIOD OF USE

Oil Recovery: From March 31 to March 31.

PURPOSE AND EXTENT OF USE

Oil Recovery: Oil Well Drilling & Completion of Island Units 25, 26, 27 & 28

Island Unit #25 In Sec. 2, T10S, R19E, SLB&M, Island Unit # 26 In Sec.

11, T10S R19E, SLB&M, Island Unit # 27 In Sec.9, T10S, R20E,

SLB&M, Island Unit # 28 In Sec.6, T10S, R20E, SLB&M

PLACE OF USE

The water is used in all or parts of each of the following legal subdivisions.

TOWN	RANGE	SEC	North East Quarter				North West Quarter				South West Quarter				South East Quarter			
			NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$
10 S	19 E	2	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	19 E	11	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	20 E	6	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	20 E	9	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

All locations In Salt Lake Base and Meridian

EXPLANATORY

Diversion point is on BLM

Appropriate

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

25

10. FIELD AND POOL OR WILDCAT

Island

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

1

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

NW NE, 610' FNL, 2099' FEL

14. PERMIT NO.

43-047-31702

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 5062'

16

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANT

(Other)

XX

SUBSEQUENT REPORT OF:

WATER SHUT OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Reconpletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wexpro Company requests permission to change the Casing Program of the above captioned well APD as follows:

Footage	Size	Grade	Wt.	Condition	Thread	Cementing Program
3635'	5 1/2"	N-80	17	New	8 rd LT&C	Cementing program will not change.
3290'	5 1/2"	K-55	17	New	Hydril FJ	

Change in casing program is due to availability of casing and associated equipment which is already in stock.

RECEIVED
APR 17 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. Mauer

TITLE Drilling Superintendent

DATE April 15, 1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

Federal approval of this action
is required before commencing
operations.

*See Instructions on Reverse Side

DATE: 4-17-86
BY: John R. Beyer

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. U-4481
2. NAME OF OPERATOR Wexpro Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902	7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	8. FARM OR LEASE NAME Unit
	9. WELL NO. 25
	10. FIELD AND POOL, OR WILDCAT Island
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E
14. PERMIT NO. 43-047-31702	12. COUNTY OR PARISH Uintah
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062'	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Supplemental History <input checked="" type="checkbox"/>	

(Other) Supplemental History (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Air spudded 4-14-86 @ 11:00 am.
Moving on Brinkerhoff Rig #85 4-15-86.
Set 9-5/8" casing - casing report to follow.
Depth. 320'.

RECEIVED
APR 17 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED <u>A. J. Mauer</u>	TITLE <u>DRILLING SUPERINTENDENT</u>	DATE <u>4-15-86</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. U-4481
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NE, 610' FNL, 2099' FEL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31702		9. WELL NO. 25
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062'		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Supplemental History	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 2930', drilling.

Landed 9-5/8-inch O.D., 36-pound, K-55, 8 round thread, ST&C casing at 309.82 feet KBM or 14.75 feet below KB. The top of the 11-inch 3000 casing flange is at ground level. Filled casing and hole with 25 barrels gel water and cemented with 165 sacks Regular Type G cement treated with 2% CaCl and 1/4-pound flocele per sack. Returned ten barrels good cement ot surface. Cement in place at 6:30 P.M. 4-14-86.

RECEIVED
APR 23 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED E. J. Mauer TITLE Drilling Superintendent DATE April 18, 1986
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. U-4481
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NE, 610' FNL, 2099' FEL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31702		9. WELL NO. 25
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062' KB 5076.75'		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Supplemental History <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6925', rig released 5:00 P.M. 4-24-86. Waiting on completion tools.

RECEIVED
APR 28 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED <u>A. J. Maser</u>	TITLE <u>Drilling Superintendent</u>	DATE <u>April 25, 1986</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. U-4481	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NE, 610' FNL, 2099' FEL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31702		9. WELL NO. 25	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062' KB 5076.75'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Supplemental History <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6925', waiting on completion tools.

Landed 5-1/2-inch O.D., 17-pound, K-55, Hydril FJ and 8 round thread, LT&C casing at 6920.99 feet KBM or 14.75 feet below KB in an 11-inch 3000 psi National casing flange that is set at ground level. Set casing weight of 110,000 pounds on casing slips. Cemented casing with 1040 sacks Type H cement treated with 3% Fly Ash and 1/4-pound flocele per sack. Followed with 428 sacks 50-50 Pozmix treated with 0.6% FL-19, 10% salt and 1/4-pound flocele per sack. Good returns throughout. Returned 50 barrels cement slurry to surface. Bumped plug with 2200 psi. Float equipment held okay. Cement in place at 2:30 P.M. 4-24-86.

RECEIVED
MAY 05 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED A. J. Maser TITLE Drilling Superintendent DATE May 2, 1986
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

2

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

NW NE, 610' FNL, 2099' FEL

14. PERMIT NO.

43-047-31702

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 5062'

KB 5076.75'

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

Island

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Supplemental History

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6925', waiting on completion tools.

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. Maser

TITLE Drilling Superintendent

DATE May 9, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

Island

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

NW NE, 610' FNL, 2099' FEL

14. PERMIT NO.

43-047-31702

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 5062'

KB 5076.75'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(Other) Replacement Rig ☒

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Please be advised that Wexpro Company will complete this well with a CRC completion rig which is presently rigging up.

RECEIVED
MAY 19 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Director, Petroleum Eng.

DATE May 14, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-111
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐
2. NAME OF OPERATOR
Wexpro Company
3. ADDRESS OF OPERATOR
P. O. Box 458, Rock Springs, Wyoming 82902
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

NW NE, 610' FNL, 2099' FEL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

43-047-31702

GR 5062'

KB 5076.75'

U-4481

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☐

Supplemental History

XXX

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The well is presently in the process of being completed.

RECEIVED
JUN 02 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED A. J. Maser

TITLE Drilling Superintendent

DATE May 30, 1986

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVR. ☐

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations)
At surface NW NE, 610' FNL, 2099' FEL

At top prod. interval reported below

At total depth

RECEIVED
JUN 06 1986

DIVISION OF
OIL, GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Island

FARM OR LEASE NAME

Unit

WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

Island

11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

15. DATE SPUDDED 4-14-86 16. DATE T.D. REACHED 4-23-86 17. DATE COMPL. (Ready to prod.) 5-30-86 18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* GL 5062' KB 5076.75' 19. ELEV. CASINGHEAD 5062' GL

20. TOTAL DEPTH, MD & TVD 6925' 21. PLUG, BACK T.D., MD & TVD 6890' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY ROTARY TOOLS Yes

24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* Wasatch 5982' to 6711' 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN FDC-CNL, DL-CR, Spectralog, CBL 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	36	309.82	12-1/4"	165 sks Class G	None
5-1/2"	17	6920.99	7-7/8"	1040 sks Class H & 428 sks 50-50 Pozmix	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

5982'-6016' KBM - 2 SPF 4" Hole
6204'-6230', 6244'-6252' KBM 2 SPF 4" Hole
6482'-6490', 6534'-6544' KBM 2 SPF 4" Hole
6652'-6668', 6705'-6711' KBM 2 SPF 4" Hole

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5982'-6016'	107,310 gals gel, 224,000# 20-40
6204'-6252'	109,326 gals gel, 232,000# 20-40
6482'-6544'	67,368 gals gel, 172,900# 20-40
6652'-6711'	85,382 gals gel, 186,560# 20-40

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
SI		Flowing					Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
5-29-86	28	13/64	→	8.3	2247	8.2	270,723	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
1860	2000	→	7	2247	7			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented while testing

TEST WITNESSED BY

Robert Christofferson

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Thomas A. Petro TITLE Director Petro. Engineering DATE June 4, 1986

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Uinta	Surface	
Green River	1,850	
Birds Nest		
Aquifer	2,355	
Wasatch Tongue	4,429	
Green River		
Tongue	4,799	
Wasatch	4,949	
Chapita Wells		
Zone	5,696	

Form 3160-4
(November 1983)
(formerly 9-330)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

Island

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

11-10S-19E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

1A. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other

B. TYPE OF COMPLETION:

NEW WELL ☒WORK OVER ☐DEEP-EN ☐PLUG BACK ☐DIFF. RENVR. ☐

Other

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface

NW NE, 610' FNL, 2099' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

43-047-31702

DATE ISSUED

3-19-86

15. DATE SPUDDED

4-14-86

16. DATE T.D. REACHED

4-23-86

17. DATE COMPL. (Ready to prod.)

5-30-86

18. ELEVATIONS (DF, RKB, RT, GB, ETC.)*

GL 5062'

KB 5076.75'

19. ELEV. CASINGHEAD

5062' GL

20. TOTAL DEPTH, MD & TVD

6925'

21. PLUG, BACK T.D., MD & TVD

6890'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

Yes

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Wasatch 5982' to 6711'

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

FDC-CNL, DL-GR, Spectralog, CBL

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	36	309.82	12-1/4"	165 sks Class G	None
5-1/2"	17	6920.99	7-7/8"	1040 sks Class H & 428 sks 50-50 Pozmix	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	5930.01'	

31. PERFORATION RECORD (Interval, size and number)

5982'-6016' KBM - 2 SPF 4" Hole
 6204'-6230', 6244'-6252' KBM 2 SPF 4" Hole
 6482'-6490', 6534'-6544' KBM 2 SPF 4" Hole
 6652'-6668', 6705'-6711' KBM 2 SPF 4" Hole

32. ACID SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5982'-6016'	107,310 gals gel, 224,000# 20-40
6204'-6252'	109,326 gals gel, 232,000# 20-40
6482'-6544'	67,368 gals gel, 172,900# 20-40
6652'-6711'	85,382 gals gel, 186,560# 20-40

33.* PRODUCTION

DATE FIRST PRODUCTION

SI

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

WELL STATUS (Producing or shut-in)

Shut-in

DATE OF TEST

5-29-86

HOURS TESTED

28

CHOKE SIZE

13/64

PROD'N. FOR TEST PERIOD

OIL—BSL.

8.3

GAS—MCF.

2247

WATER—BSL.

8.2

GAS-OIL RATIO

270,723

FLOW, TUBING PRESS.

1860

CASING PRESSURE

2000

CALCULATED 24-HOUR RATE

OIL—BSL.

7

GAS—MCF.

2247

WATER—BSL.

7

OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented while testing

TEST WITNESSED BY

Robert Christofferson

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE Director Petro. Engineering DATE June 4, 1986

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries);

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Uinta	Surface	
Green River	1,850	
Birds Nest		
Aquifer	2,355	
Wasatch Tongue	4,429	
Green River		
Tongue	4,799	
Wasatch	4,949	
Chapita Wells		
Zone	5,696	

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

102223

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. U-4481
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NE, 610' FNL, 2099' FEL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31702		9. WELL NO. 25
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5062'		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-10S-19E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) See Below <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Request permission to install production facilities as shown on attached drawing.

Your expeditious approval would be appreciated.

RECEIVED
OCT 20 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED H. K. [Signature] TITLE District Manager DATE 10/8/86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

Federal approval of this action
is required before commencing
operations.

*See Instructions on Reverse Side

ACCEPTED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE 10-21-86

BY [Signature]

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 1800 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

MUD PIT TO BE UNLINED & FENCED

AREA "A" SHOULD BE LEVELED TO STACK DRILL PIPE, SET "FRAC" TANKS, TESTING SEPARATOR AND OTHER EQUIPMENT.

REFERENCE POINTS ARE SET AT 161.31' NORTH, 196.06' SOUTH, 17011C EAST AND 138.64' WEST.

AREA FOR LOCATION IS 224 ACRES.

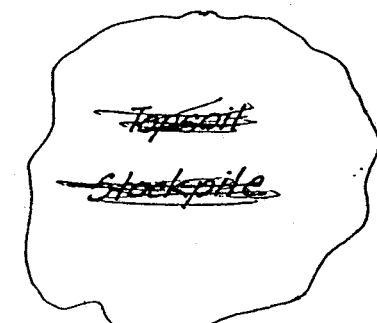
REFERENCE DRAWINGS ARE:
 M-25072 M-25075
 M-25074 M-12205

DEADMAN ANCHORS ARE AT 120' SPACING (MIN.)

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

CONTOURS ARE AT 1' INTERVALS.

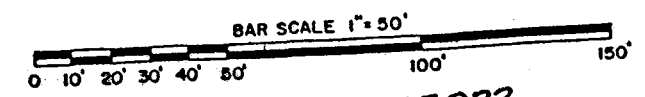
Prevailing Wind



- = GAS LINE
- = OIL LINE
- = WATER LINE
- = FUEL GAS
- = DRAIN LINES

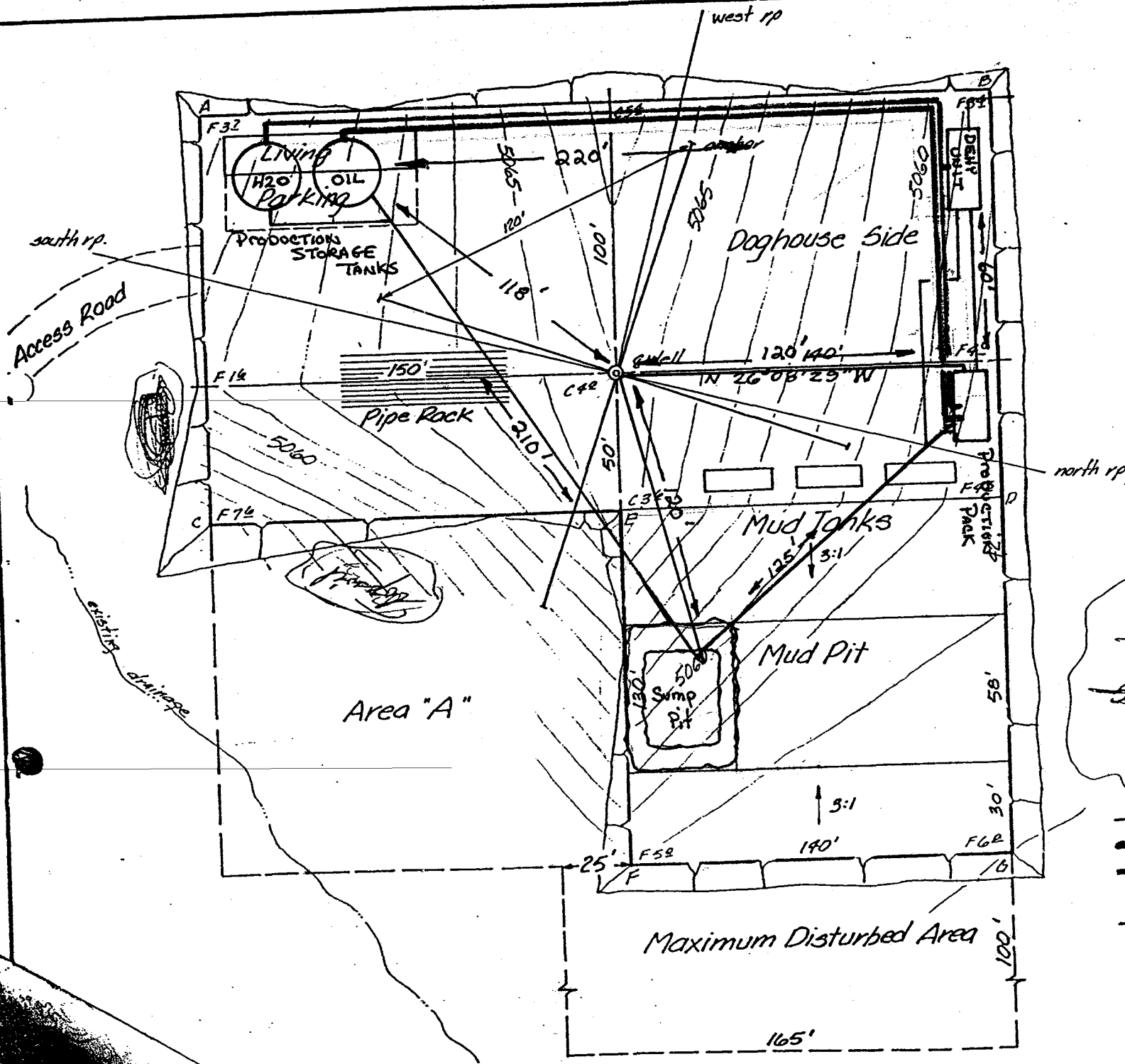
Enlarged Site Plan

Island Unit Well No. 25



M-25073

2-3-86 R.C. Parker



43-047-3170
SGW



United States Department of the Interior

BUREAU OF LAND MANAGEMENT

VERNAL DISTRICT OFFICE

170 South 500 East

Vernal, Utah 84078

IN REPLY
REFER TO:

3162.32
(U-8020)
Oil & Gas Leases
U-4481, ML-11004,
U-013768

RECEIVED
MAY 07 1987

DIVISION OF
OIL, GAS & MINING

April 28, 1987

Ms. Cathy J. Flansburg
Regulatory Affairs Technician
Wexpro Company
625 Connecticut Avenue
P.O. Box 1129
Rock Springs, Wyoming 82901

Re: Request for NTL-2B Approval
Island Unit Wells 25, 26, & 27
Sec. 2 & 11 of T.10S., R.19E.
Sec. 9 of T.10S., R.20E.
Uintah County, Utah

Dear Ms. Flansburg:

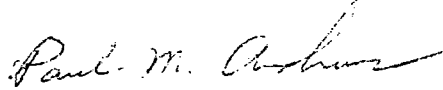
We have reviewed your requests for NTL-2B water disposal facilities at the three above mentioned wells. At the Island Unit No. 25 well on Lease U-4481, your request is approved subject to the guidelines and requirements provided for in Section V, NTL-2B.

At the Island Unit No. 26 well on Lease ML-11004, the State of Utah Division of Oil, Gas and Mining has NTL-2B jurisdiction. The pit location is quite close to a dry wash of moderate size and the pit is partially in fill material. You should contact the State of Utah Division of Oil, Gas and Mining with regard to your application for this well.

At the Island Unit No. 27 well on Lease U-013768, we request that the pit No. 1 be clay lined as a condition for approval due to its proximity to Willow Creek. When this pit is appropriately lined, then your request will be approved subject to the guidelines and requirements provided in Section V, NTL-2B.

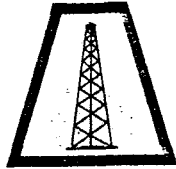
As part of the requirements for the approval of the pits at Island Unit No. 25 and the conditional approval of the pits at Island Unit No. 27, the fences are to receive regular maintenance.

Sincerely,

A handwritten signature in cursive script, appearing to read "Paul M. Andrews".

Paul M. Andrews
Area Manager
Bookcliffs Resource Area

cc: John Baza
Utah Div. of Oil, Gas, & Mining
Salt Lake City, Utah



WEXPRO COMPANY

625 CONNECTICUT AVENUE • P.O. BOX 1129 • ROCK SPRINGS, WYOMING 82901 • (307) 362-5611

January 5, 1987

Bureau of Land Management
Division of Mineral Resources
Branch of Fluids
170 South 500 East
Vernal, UT

146
RECEIVED
MAY 07 1987

**DIVISION OF
OIL, GAS & MINING**

Re: Island Unit Well No. 26
SE SE 2-10S-19E
Uintah County, Utah
Lease No. ML-11004

Gentlemen:

Pursuant to the requirements of NTL-2B, Wexpro Company hereby applies for approval of the disposal of produced water into two unlined pits. This application is based on NTL-2B (IV) (4), in that the volume of water to be disposed of does not exceed five (5) barrels per day on a monthly basis. As required, the following information is submitted:

1. Quantity produced: 5 BWPB, Pit No. 1
Trace BWPB, Pit No. 2
2. Refer to attached map showing pit; source is the Wasatch formation.
3. Evaporation rate compensated for annual rainfall: 36" per year.
4. Estimated percolation rate: 46" per year.
5. Usable water aquifer: refer to report by Mountain Fuel dated September 2, 1986 entitled "Usable Water Aquifer Study" on file with the BLM, Vernal District Office.

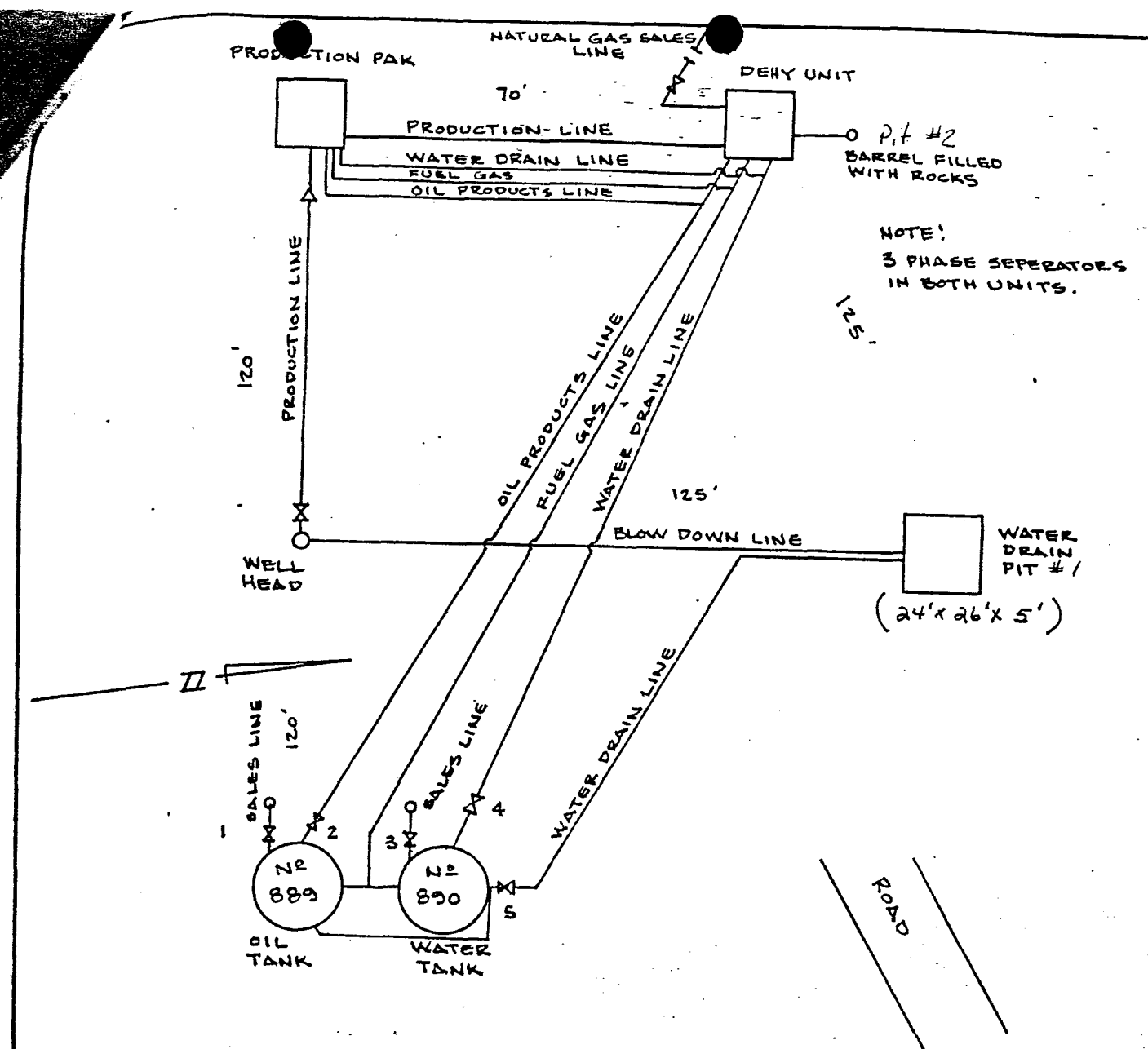
If you have any questions or require further information, please give me a call.

Respectfully,

Cathy J. Flansburg
Cathy J. Flansburg
Regulatory Affairs Technician

Attachment

cc: J. L. Ingerson
S. R. Brause



LEGEND

- |— GAS METER
- △— CHOKE
- X— VALVE
- SEAL
- INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	CLOSED	OPEN			
2	OPEN	CLOSED			
3	CLOSED	OPEN			
4	OPEN	CLOSED			
5	CLOSED	CLOSED			

OPERATOR: Wexpro Company

LEASE NO.: ML-11004

TYPE: STATE

NAME: ISLAND UNIT WELL No. 26

SEC. 2

T. 10 S.

R. 10 E.

COUNTY: UTAH

STATE: UTAH

INITIAL PRODUCTION: DECEMBER 1986

SITE SECURITY DIAGRAM

ISLAND UNIT WELL No. 26

DRAWN: 1/2/87 CRW

SCALE: NONE

CHECKED:

DRWG.

NO.

25392

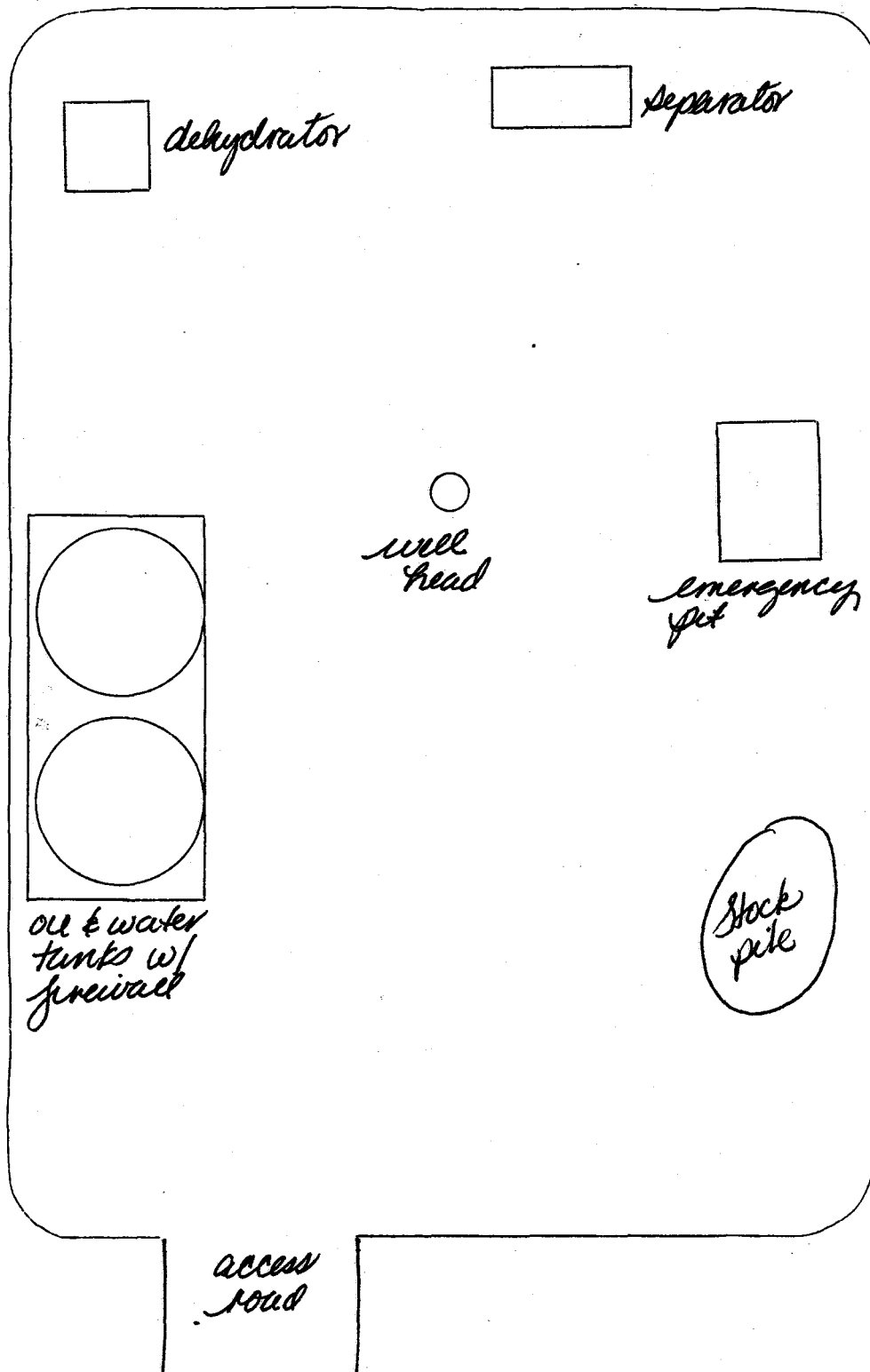
APPROVED:

Island Unit #2

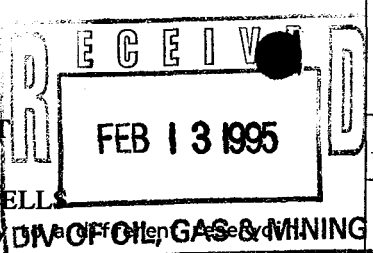
Sec 11, 1080, 196

Kelly 6 June 88

N



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

NW NE, 610' FNL, 2099' FEL, Sec 11, T105, R19E

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. IF UNIT OR CA, AGREEMENT DESIGNATION

Island

8. WELL NAME AND NO.

Unit No. 25

9. API WELL NO.

4304731702

10. FIELD AND POOL, OR EXPLORATORY AREA

Island

11. COUNTY OR PARISH, STATE

Uintah, Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Undesirable Event

☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

On 2-07-95 3 Bbl of fluid (1 Bbl oil and 2 Bbl water) leaked from the production pit of the above well. No fluid reached navigable waters. The stained soil will be cleaned up with shovels and the production pit will be resealed with Bentonite.

Event reported to the following organizations on 2-08-95:

BLM - Wayne Bankert at 9:25 a.m.

Utah Oil & Gas - Mike Heberson at 9:45 a.m.

14. I hereby certify that the foregoing is true and correct

Signed

Title

OPERATIONS MANAGER

Date

2/9/95

(This space for Federal or State office use)

Approved by

Title

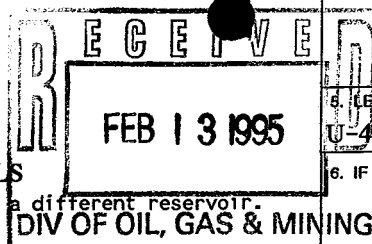
Date

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

NW NE, 610' FNL, 2099' FEL, Sec 11, T105, R19E

7. IF UNIT OR CA, AGREEMENT DESIGNATION

Island **

8. WELL NAME AND NO.

Unit No. 25

9. API WELL NO.

4304731702

10. FIELD AND POOL, OR EXPLORATORY AREA

Island

11. COUNTY OR PARISH, STATE

Uintah, Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Undesirable Event

☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

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OPERATIONS MANAGER

Date

2/9/95

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Approved by

Title

Date

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

NW NE 11-10S-19E, 610' FNL, 2099' FEL

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. LEASE DESIGNATION AND SERIAL NO.

U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

ISLAND UNIT NO. 25

9. API WELL NO.

43-047-31702

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

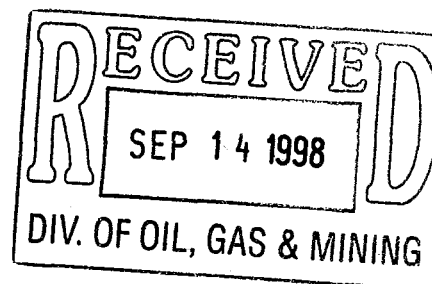
TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Change facilities
☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company proposes to install a blowdown tank at the above location and close the earthen pit. Please refer to the attached schematic



14. I hereby certify that the foregoing is true and correct

Signed *G. T. Nimmo*

Title

G. T. Nimmo, Operations Manager

September 8, 1998

Date

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any

Accepted by the

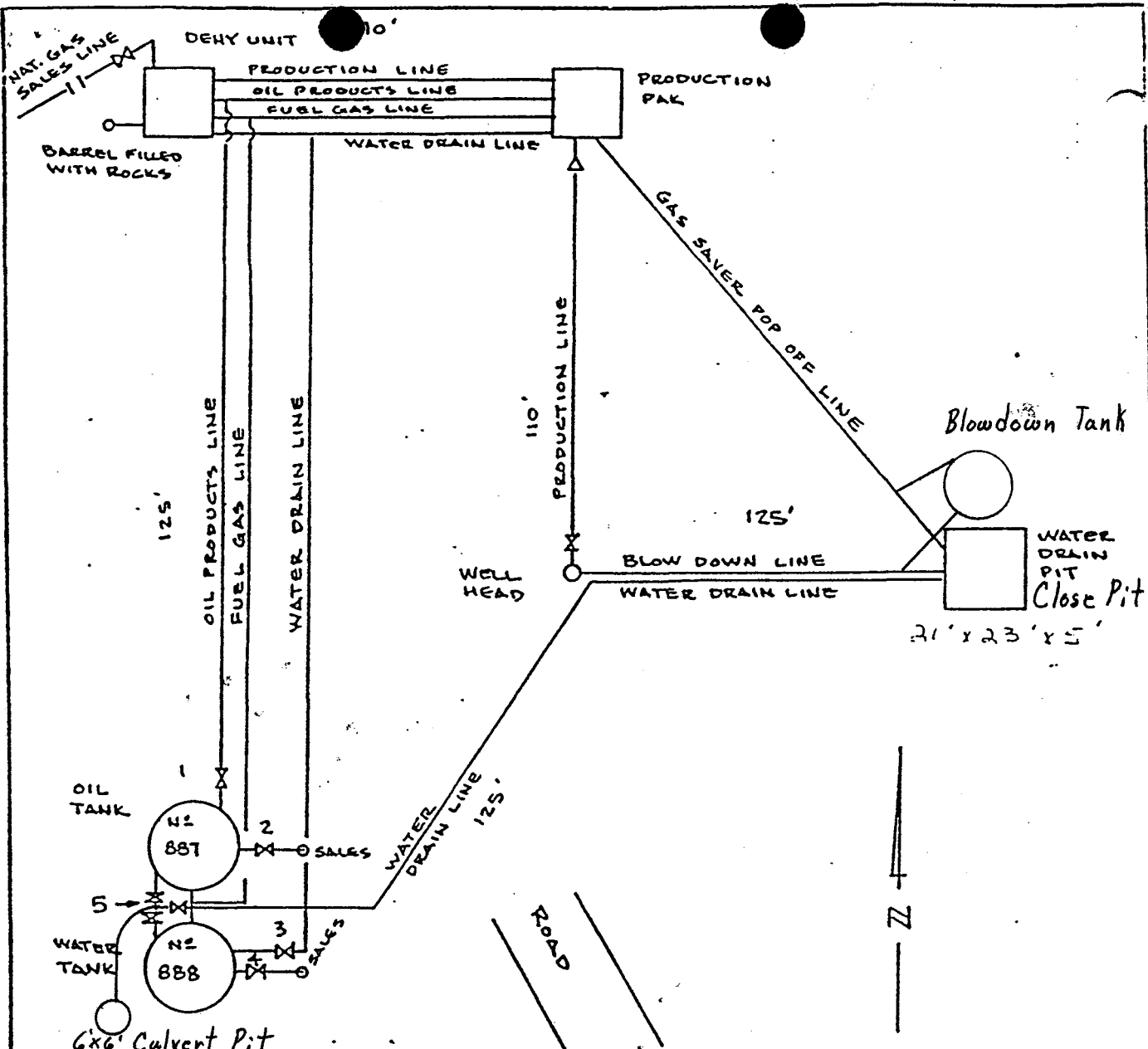
Utah Division of

Oil, Gas and Mining

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*See Instruction on Reverse Side

FOR RECORD ONLY



REV. 1/15/87

OPERATOR: MOUNTAIN FUEL RESOURCES, INC.

LEASE NO.: U-4481 TYPE: FEDERAL

NAME: ISLAND UNIT WELL NO. 25

SEC. 11 N/WNE T. 10 S. R. 19 E.

COUNTY: Uintah

STATE: UTAH

INITIAL PRODUCTION: DECEMBER 1986

SITE SECURITY DIAGRAM

ISLAND UNIT WELL NO. 25

DRAWN: 1/2/87 CRW SCALE: NONE

CHECKED:

DRWG.

APPROVED:

NO. 25391

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT -" for such proposals

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. LEASE DESIGNATION AND SERIAL NO.
U-4481

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

ISLAND UNIT NO. 25

9. API WELL NO.
43-047-31702

10. FIELD AND POOL, OR EXPLORATORY AREA
ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

NW NE 11-10S-19E, 610' FNL, 2099' FEL

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

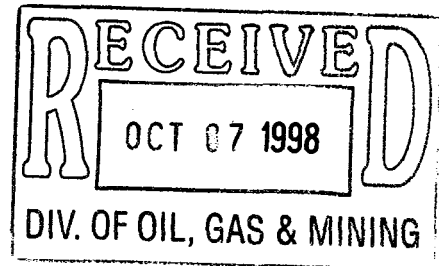
TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Install Culvert Pit
☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company proposes to install a 6' X 6' culvert pit as a tank drain on the production tank on the above location.
Please refer to the attached schematic. The pit will have an earthen bottom and an expanded metal lid.



14. I hereby certify that the foregoing is true and correct

Signed

Title

G. T. Nimmo, Operations Manager

Date

October 5, 1998

(This space for Federal or State office use)

Approved by

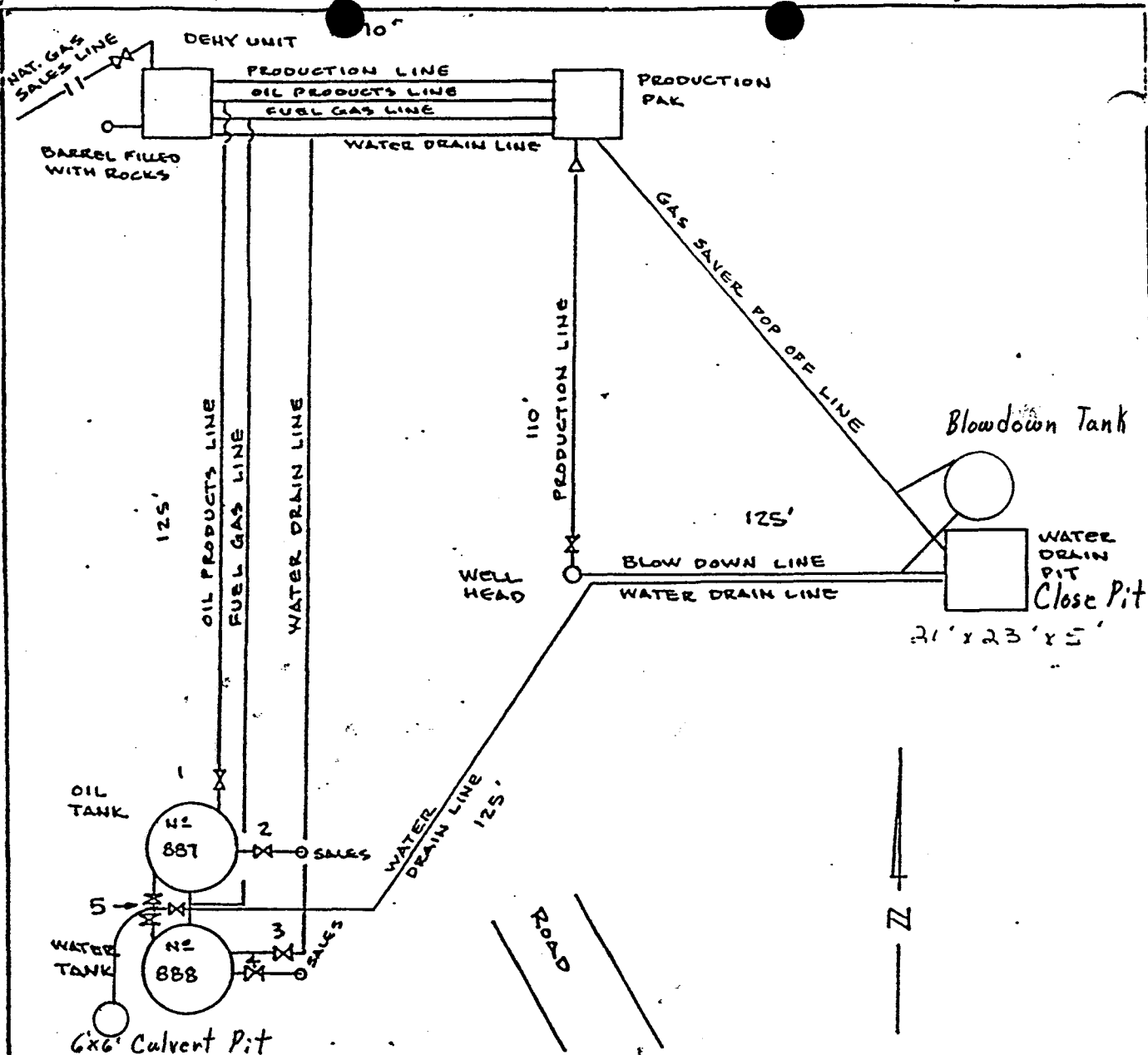
Title

Date

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*See Instruction on Reverse Side



REV. 1/15/87

OPERATOR: MOUNTAIN FUEL RESOURCES, INC.
 LEASE NO.: U-4481 TYPE: FEDERAL
 NAME: ISLAND UNIT WELL NO. 25
 SEC. 11 N/WNE T. 10S. R. 19 E.
 COUNTY: UTAH
 STATE: UTAH
 INITIAL PRODUCTION: DECEMBER 1986

SITE SECURITY DIAGRAM

ISLAND UNIT WELL NO. 25

DRAWN: 1/2/87 CRW SCALE: NONE

CHECKED:

DRWG.

APPROVED:

NO. 25391

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

43.047.31702

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. LEASE DESIGNATION AND SERIAL NO.

SEE ATTACHED SHEET

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

SEE ATTACHED SHEET

9. API WELL NO.

SEE ATTACHED SHEET

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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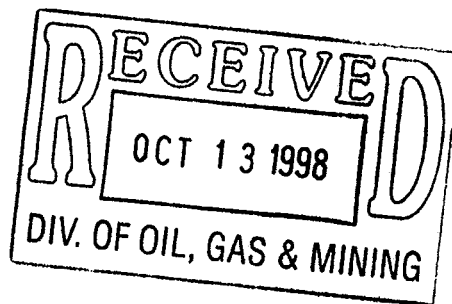
TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Produced Water Disposal
☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company is required as a Condition of Approval on Sundry Notices approving installation of blowdown tanks on Island Unit Wells No. 21, 25, 26, 27 and 30, to notify the BLM of the name and location of the facility to be used to dispose of produced water. Please note that all excess produced water is hauled by tank truck over Unit, Tribal, County and State roads to the Ace Disposal Pit which is approved by the State of Utah. Attached is a list of all wells in the Island Unit. Produced water from any of these wells may be hauled to the Ace Pit.



14. I hereby certify that the foregoing is true and correct

Signed

Title

G. T. Nimmo, Operations Manager

Date

October 9, 1998

(This space for Federal or State office use)

Approved by

Title

Date

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WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECRTY REVISED
ISLAND UNIT					891006935A								
UNIT NO. 3	4304715643	WAG	NE SW 8-10S-20E	UINTAH, UT		U-4486	WASATCH	TRACE	4	24X25X4	6-18-84	7-27-84	04-27-85
UNIT NO. 9	4304730488	WAG	C SW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	18X12X4	4-22-80	5-9-80	8-10-90
UNIT NO. 11	4304731241	WAG	SE NW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 12	4304731242	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	16X20X6	6-18-84	7-27-84	8-10-90
UNIT NO. 13	4304731239	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 14	4304731331	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4481	WASATCH	4.00	4	16X20X5	6-18-84	7-27-84	8-10-90
UNIT NO. 15	4304731330	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 16	4304731505	CIO	NE SW 11-10S-18E	UINTAH, UT		U-4484	WASATCH	4.50	4	16X19X8	6-18-84	7-27-84	12-1-87
UNIT NO. 17	4304731503	WAG	SE SW 2-10S-19E	UINTAH, UT		U-4486	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 18	4304731502	WAG	SE NW 2-10S-19E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	05-27-98
UNIT NO. 19	4304731633	WAG	SE SW 9-10S-20E	UINTAH, UT		U-4482	WASATCH	0.57	4	12X12X4	6-18-84	7-27-84	8-10-90
						U-013818	GREEN RIVER	TRACE	4	BARREL	5-13-86	6-4-86	
								1.00	4	24X24X8	3-13-85	8-20-87	3-3-89
								0.25	4	8X10X3	3-13-85	8-20-87	
						ML-11004	WASATCH	EMRG		12X12X6	6-26-86**	NO ST. RESP.	8-20-90
						ML-11004	WASATCH	EMRG		12X12X4	6-26-86**	NO ST. RESP.	07-14-98
						U-013768	WASATCH	EMRG		10X10X8	5-8-86	8-8-86	7-28-88
								TRACE	4	7X28X4	7-14-86	8-8-86	
UNIT NO. 20	4304731629	WAG	SW NW 7-10S-20E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	7-14-86	8-8-86	
								3.50	4	14X12X8	1-20-86	2-10-86	1-20-86
								TRACE	4	9X8X3	1-20-86	2-10-86	
UNIT NO. 21	4304731628	WAG	NW NW 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	1-20-86	2-10-86	
								EMRG		12X12X8	5-8-86	6-4-86	7-28-88
								TRACE	4	11X11X3	5-8-86	6-4-86	
UNIT NO. 22	4304731632	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013768	WASATCH	TRACE	4	BARREL	5-8-86	6-4-86	
								TRACE	4	13X6X5	7-15-86	8-8-86	05-27-98
UNIT NO. 23	4304731631	WAG	NE NE 9-10S-20E	UINTAH, UT		U-013768	WASATCH	TRACE	4	BARRELL	8-22-88	9-15-88	
								3.70	4	16X9X5	7-14-86	8-8-86	1-20-86
								TRACE	4	5X9X4	7-14-86	8-8-86	
UNIT NO. 24	4304731630	WAG	SW NW 8-10S-20E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	7-14-86	8-8-86	
								1.50	4	11X8X7	1-20-86	2-10-86	1-20-86
UNIT NO. 25	4304731702	WAG	NW NE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	1-20-86	2-10-86	
								5.00	4	21X23X5	1-5-87	4-28-87	8-22-88
UNIT NO. 26	4304731701	WAG	SE SE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	BARREL	1-5-87**	NO ST. RESP.	8-22-88
								5.00	4	24X26X5	1-5-87**	NO ST. RESP.	
UNIT NO. 27	4304731703	WAG	NE NW 9-10S-20E	UINTAH, UT		U-013768	WASATCH	TRACE	4	BARREL	1-5-87	4-28-87	8-22-88
								5.00	4	15X21X10	11-9-88	12-21-88	
UNIT NO. 29	4304731752	WAG	SE NE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	07-14-98
								5.00	4	16X16X6	2-17-87	3-13-87	
UNIT NO. 30	4304731749	WAG	NW NE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	12-1-87
								5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 32	4304731751	WAG	SW NE 8-10S-20E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	10-07-91
								5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 34	4304732962	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4486	WASATCH						
UNIT NO. 35	4304732963	WAG	NE SE 8-10S-20E	UINTAH, UT		U-013768	WASATCH						05-27-98
UNIT NO. 36	4304732964	WAG	SE SE 9-10S-20E	UINTAH, UT		14-20-482-391	WASATCH						05-27-98
UNIT NO. 37	4304732966	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH						05-27-98
UNIT NO. 38	4304733107	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			05-15-98
UNIT NO. 39	4304732967	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 41	4304732968	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			05-15-98
UNIT NO. 43	4304732965	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013768	WASATCH			NO PIT			05-27-98
UNIT NO. 44	4304732959	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH						05-27-98
UNIT NO. 45	4304732960	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH						05-27-98
UNIT NO. 46	4304732961	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH						05-27-98
UNIT NO. 50	4304733108	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4482	WASATCH						05-27-98
UNIT NO. 51	4304733109	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 52	4304733110	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 53	4304733111	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 54	4304733112	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 55	4304733113	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECRTY REVISED
UNIT NO. 58	4304733114	WVG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE BELOW

43.047.31702

5. LEASE DESIGNATION AND SERIAL NO.
SEE BELOW

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

ISLAND UNIT WELLS

9. API WELL NO.

SEE BELOW

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

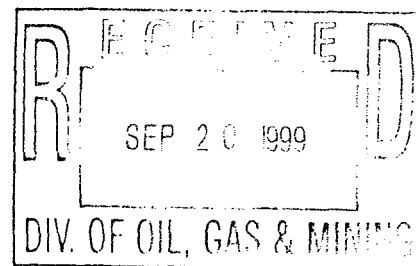
☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other ELECTRONIC MEASUREMENT
☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

On all wells in the Island Unit, with the exception of Island No. 23, Wexpro intends to install EGM to replace the current gas chart meters. A Fisher ROC model 364/MCU will be installed with the following Rosemount transducers, 3051CG3M52A1AT1, 3051CD2M52A1AT1 and 0444LM1U1A2E5.

See attached for the list of wells to be included in the project.



14. I hereby certify that the foregoing is true and correct

Signed G. T. Nimmo Title G. T. Nimmo, Operations Manager

Date September 16, 1999

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

WELL NAME	PAD NO.	API NUMBER	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER
ISLAND UNIT				Unit Number	891006935A	
UNIT NO. 3		4304715643	NE SW 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 9		4304730488	C SW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 10	8	4304730725	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 11		4304731241	SE NW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 12	6	4304731242	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 13	5	4304731239	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 14	3	4304731331	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 15		4304731330	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 16		4304731505	NE SW 11-10S-18E	UINTAH, UT		U-013818
UNIT NO. 17		4304731503	SE SW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 18		4304731502	SE NW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 19		4304731633	SE SW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 20	7	4304731629	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 21		4304731628	NW NW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 22	4	4304731632	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 24		4304731630	SW NW 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 25		4304731702	NW NE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 26		4304731701	SE SE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 27		4304731703	NE NW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 29		4304731752	SE NE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 30		4304731749	NW NE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 32		4304731751	SW NE 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 34	3	4304732962	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 35	3	4304732963	NE SE 8-10S-20E	UINTAH, UT		U-013768
UNIT NO. 36	4	4304732964	SE SE 9-10S-20E	UINTAH, UT		14-20-462-391
UNIT NO. 37	1	4304732966	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 38	5	4304733107	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 39	1	4304732967	NW NW 8-10S-20E	UINTAH, UT		U-4481
UNIT NO. 41	1	4304732968	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 43	4	4304732965	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 44	2	4304732959	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 45	2	4304732960	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 46	2	4304732961	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 50	5	4304733108	SE SE 12-10S-19E	UINTAH, UT		U-4482
UNIT NO. 51	5	4304733109	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 52	5	4304733110	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 53	6	4304733111	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 54	6	4304733112	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 55	6	4304733113	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 56	6	4304733114	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 64	7	4304733304	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 65	7	4304733305	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 66	7	4304733306	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 67	8	4304733307	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 68	8	4304733308	SW SW 12-10S-19E	UINTAH, UT		U-4484

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004- 0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
*Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.*

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. U-4481
2. Name of Operator Wexpro Company		6. If Indian, Allottee, or Tribe Name N/A
3a. Address P.O. Box 458 Rock Springs, WY 82902	3b. Phone No. (include area code) 307.382.9791	7. If Unit or CA. Agreement Name and/or No. UTU063026X Island Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 610' FNL 2099' FEL NW NE 11-10S-19E		8. Well Name and No. Island Unit No. 25
		9. API Well No. 43-047-31702
		10. Field and Pool, or Exploratory Area Island
		11. County or Parish, State Uintah Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

The above well resumed production, after being off for more than 90 days, on November 27, 2007 at 2:30 PM.

RECEIVED
DEC 03 2007
DIV. OF OIL, GAS & MINING

14. I hereby certify that the foregoing is true and correct.
Name (Printed/ Typed)

G.T. Nimmo

Signature

Title

Operations Manager

Date

November 28, 2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
*Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.*

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. U-4481
2. Name of Operator Wexpro Company		6. If Indian, Allottee, or Tribe Name N/A
3a. Address P.O. Box 458 Rock Springs, WY 82902	3b. Phone No. (include area code) 307.382.9791	7. If Unit or CA. Agreement Name and/or No. UTU063026X Island Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 610' FNL 2099' FEL NW NE 11-10S-19E		8. Well Name and No. Island Unit No. 25
		9. API Well No. 43-047-31702
		10. Field and Pool, or Exploratory Area Island
		11. County or Parish, State Uintah Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input checked="" type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

Water produced from the above well will be disposed of in a water / blow down tank as previously approved.
Excess water production will be hauled to the following State of Utah approved disposal sites:

R N Industries Inc Sec. 4-2S-2W - Bluebell
LaPoint Recycle & Storage Sec. 12-5S-19E - LaPoint
Dalbo, Inc Sec. 02-6S-20E - Vernal

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY

All excess produced water will be hauled by tank truck over Unit, Tribal, County and State roads.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature

Date

April 24, 2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

RECEIVED

APR 28 2008

DIV. OF OIL, GAS & MINING

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: U-4481
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: ISLAND
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: ISLAND UNIT 25
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0610 FNL 2099 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 11 Township: 10.0S Range: 19.0E Meridian: S		9. API NUMBER: 43047317020000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: NATURAL BUTTES
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		COUNTY: UINTAH
STATE: UTAH		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/6/2009	<input type="checkbox"/> ALTER CASING	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CASING REPAIR	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	
	<input type="checkbox"/> CHANGE TUBING	
	<input type="checkbox"/> CHANGE WELL STATUS	
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	
	<input type="checkbox"/> DEEPEN	
	<input type="checkbox"/> FRACTURE TREAT	
	<input type="checkbox"/> OPERATOR CHANGE	
	<input type="checkbox"/> PLUG AND ABANDON	
	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	
	<input type="checkbox"/> RECLAMATION OF WELL SITE	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	
	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	
	<input type="checkbox"/> TUBING REPAIR	
	<input type="checkbox"/> VENT OR FLARE	
	<input type="checkbox"/> WATER SHUTOFF	
	<input type="checkbox"/> SI TA STATUS EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	
	<input type="checkbox"/> OTHER: _____	
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well resumed production, after being off for more than 90 days, on 11/06/2009 at 9:20 AM.		
Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY November 09, 2009		
NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 922-5647	TITLE Associate Permit Agent
SIGNATURE N/A	DATE 11/9/2009	